



**Zoning District Change  
Request for Hearing**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Attorney: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

**I (we) request that a determination be made by the (Board of Supervisors) (Zoning Hearing Board) on the following request:**

A Zoning District Change is requested from \_\_\_\_\_ to \_\_\_\_\_

Location: \_\_\_\_\_

Present use: \_\_\_\_\_

Lot size: \_\_\_\_\_ Map & Parcel Number: \_\_\_\_\_

Have any previous applications been filed in connection with this property? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, please describe with dates and disposition:

\_\_\_\_\_  
\_\_\_\_\_

I (we) believe the Board should approve this request because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the above is true and correct to the best of my knowledge:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

A proposed amendment or petition shall be written as proposed to be adopted. Revisions to the Zoning Map shall be specified in writing, citing boundaries, including *Bearings and Distances*. All additional information as outlined in the *Township Zoning Ordinance* and the *Pennsylvania Municipalities Planning Code*, shall be included also.

**Rezoning Fee: \$2000.00 or actual cost incurred by the Township, or whichever is greater.**

**O F F I C I A L U S E O N L Y**

Dates Advertised: \_\_\_\_\_ Planning Commission: \_\_\_\_\_  
\_\_\_\_\_

Date Fee Paid: \_\_\_\_\_ Date Posted: \_\_\_\_\_ Date of Hearing: \_\_\_\_\_